



WATER SHUT-OFF APPLICATION

Date Filled: _____
Received By: _____
Service Fee Paid: _____

Instructions: Please read carefully and answer all questions thoroughly. Only complete applications will be accepted after validation by the Utility Department and payment of required processing fees, unpaid service fees and charges.

Property Information

Property Identification Number (PID#): _____
Street Address: _____

Applicant Information

Name: _____ Business Name: _____
Address: _____
City: _____ State: _____ Zip Code : _____
Telephone: _____ Fax: _____ e-mail: _____

Property Owner Information (If other than applicant):

Name: _____ Business Name: _____
Address: _____
City: _____ State: _____ Zip Code : _____
Telephone: _____ Fax: _____ e-mail: _____

Requested Water Service Shut Off: Date: _____

Actual shut-off of water service will be based on City scheduling availability and property owner remains responsible for all service charges up to date service is actually discontinued.

UNOCCUPIED DWELLING: Section 6-2-11 and 7-8-11 of the City Code prohibited discontinuing water service to any residential dwelling occupied as a rental housing unit. By signing the request to discontinue water service application below, the undersigned applicant and/or property owner certify to the City that the residential dwelling is 1) not a rental housing dwelling defined by the City Code, and 2) not occupied as a residential dwelling. Providing incorrect or false information regarding the status of a residential dwelling may be prosecuted as an administrative, civil or criminal violation of the City Code.

I, the undersigned, hereby apply for water service to be shut-off at the curb stop to the above referenced property and declare that the information submitted in support of this application are in compliance with adopted City policy and ordinance requirements and are complete to the best of my knowledge.

Applicant: _____ Date: _____

Property Owner: _____ Date: _____

STATE OF MINNESOTA)
) ss.
COUNTY OF _____)

On this ____ day of _____, 20__, before me, a notary public within and for said county, personally appeared _____, an _____ who executed the same on behalf of them (themselves).

Notary Public

SEAL

Signature: _____

Print Name: _____